PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

36327-95396

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			l .		10010					OR T		
			20		! ·	·		RATE	FEE	┨	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* @			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		· Q			X43=		OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	;
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in column			ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	·	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CI AINA	-		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	JETIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		OR	TOTAL	
		(Column 1)	P	NDDIT. FEE			ADDIT. FEE					
_		CLAIMS		(Colum	EST	(Column 3)	lr		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	lſ	X43=		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
							L	+145=		OR	+290=	•
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	•
		(Column 1)		(Colum	n 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR,	TOTAL ODIT. FEE	
 	ττης ™ighest Nur The "Highest Num	mber Previously Paid ber Previously Paid	ut For IN THIS I For (Total or	SPACE is Independei	less than nt) is the	n 3, enter "3." highest number			opriate box			